



# CT-32-A

New York State Department of Taxation and Finance

## Banking Corporation Combined Franchise Tax Return

Tax Law — Article 32

Staple forms here

All filers must enter tax period:

beginning  ending

Amended return

|  |   |   |   |                                     |
|--|---|---|---|-------------------------------------|
| Employer identification number   | File number   | Business telephone number<br>( )  | If you claim an overpayment, mark an <b>X</b> in the box <input type="checkbox"/> |                                     |
| Legal name of corporation  |   | Trade name/DBA  |   |                                     |
| Mailing name (if different from legal name above)<br>c/o   |   | State or country of incorporation   | Date received (for Tax Department use only)                                       |                                     |
| Number and street or PO box  |   | Date of incorporation   |   |                                     |
| City   | State   | ZIP code  | Foreign corporations: date began business in NYS                                  |                                     |
| NAICS business code number (from federal return)   | If address above is new, mark an <b>X</b> in the box <input type="checkbox"/> | If your name, employer identification number, address, or owner/officer information has changed, you must file Form DTF-95. If only your address has changed, you may file Form DTF-96. You can get these forms from our Web site, by fax, or phone. See <i>Need help?</i> in the instructions. |   | Audit (for Tax Department use only) |
| Principal business activity  |   |   |   |                                     |
| ZIP code (U.S. headquarters)   | or  | Name of country (foreign headquarters)  | County code   | New York assets                     |
| Type of bank   | Clearinghouse <input type="checkbox"/>  | Savings <input type="checkbox"/>  | Other commercial: <input type="checkbox"/>  | Total assets everywhere             |
| Federal return filed: 1120 <input type="checkbox"/> 1120F <input type="checkbox"/> Consolidated <input type="checkbox"/> Other: <input type="checkbox"/> |   |   |   |                                     |

If the IRS has completed an audit of any of your returns in the past 5 years, list years: \_\_\_\_\_  
Did you do business in the Metropolitan Commuter Transportation District during the tax year? ..... Yes  No  If Yes, you must file Form CT-32-M.

|   |                      |
|---|----------------------|
| <b>A.</b> Pay amount shown on line 17. Make payable to: <b>New York State Corporation Tax</b> | Payment enclosed     |
| Attach your payment here. Detach all check stubs. (See instructions for details.)             | <input type="text"/> |

### Schedule A — Computation of combined tax and payment of estimated tax (see instructions)

|  |   |         |      |        |
|--|---|---------|------|--------|
| 1  | Allocated taxable entire net income (ENI) from line 59  | x .075  | 1.   |        |
| 2  | Allocated combined alternative ENI from line 68, column E   | x .03   | 2.   |        |
| 3  | Allocated combined taxable assets from line 72, column E  | x .0001 | 3.   |        |
| 4  | Fixed minimum tax for parent corporation only   |         | 4.   | 250 00 |
| 5  | Combined franchise tax (amount from line 1, 2, 3, or 4, whichever is greatest)  |         | 5.   |        |
| 6  | Tax credits (see instructions)  |         | 6.   |        |
| 7  | Net franchise tax (subtract line 6 from line 5)   |         | 7.   |        |
| 8  | Combined fixed minimum tax for member corporations (number of taxable member corporations x \$250)                          |         | 8.   |        |
| 9  | Total combined franchise tax (add lines 7 and 8)  |         | 9.   |        |
| <b>First installment of estimated tax for the next period:</b> |   |         |      |        |
| 10a  | If you filed a request for extension, enter amount from Form CT-5.3, line 5   |         | 10a. |        |
| 10b  | If you did not file Form CT-5.3 and line 7 is over \$1,000, see instructions  |         | 10b. |        |
| 11   | Total (add line 9 and line 10a or 10b)  |         | 11.  |        |
| 12   | Total prepayments from line 210   |         | 12.  |        |
| 13   | Balance (if line 12 is less than line 11, subtract line 12 from line 11)  |         | 13.  |        |
| 14   | Penalty for underpayment of estimated tax (mark an <b>X</b> in the box if Form CT-222 is attached) <input type="checkbox"/> |         | 14.  |        |
| 15   | Interest on late payment (see instructions)   |         | 15.  |        |
| 16   | Late filing and late payment penalties (see instructions)   |         | 16.  |        |
| 17   | Balance due (add lines 13 through 16 and enter here; enter payment amount on line A above)                                  |         | 17.  |        |

(continued)

|                     |  |                                |   |
|---------------------|--|--------------------------------|---|
| Name of corporation |  | Employer identification number |   |
| <b>18</b>           | Overpayment (if line 11 is less than line 12, subtract line 11 from line 12) .....             | <b>18.</b>                     |   |
| <b>19</b>           | Amount of overpayment to be credited to the next period .....                                  | <b>19.</b>                     |   |
| <b>20</b>           | Balance of overpayment (subtract line 19 from line 18) .....                                   | <b>20.</b>                     |   |
| <b>21</b>           | Amount of overpayment to be credited to Form CT-32-M .....                                     | <b>21.</b>                     |   |
| <b>22a</b>          | Refund of overpayment (subtract line 21 from line 20, see instructions) .....                  | <b>22a.</b>                    |   |
| <b>22b</b>          | Refund of unused tax credits (see instructions) .....  | <b>22b.</b>                    |   |
| <b>22c</b>          | Tax credits to be credited as an overpayment to next year's return (see instructions) .....    | <b>22c.</b>                    |   |
| <b>23</b>           | Issuer's allocation percentage (see Schedule I instructions; show computation on page 8) ..... | <b>23.</b>                     | % |

**Schedule B — Computation and allocation of ENI (see instructions)**

**24** Federal taxable income (FTI) before net operating loss (NOL) and special deductions .....

**Additions**

- 25** Dividends and interest effectively connected with the conduct of a trade or business not included on line 24 .....
- 26** Income effectively connected with the conduct of a trade or business not included on line 24 .....
- 27** Dividends and interest not included on line 24 .....
- 28** Income taxes paid to the United States, its possessions, or to foreign countries, as deducted on federal return .....
- 29** New York State franchise taxes deducted on federal return .....
- 30** Total amount of federal depreciation from Form CT-399 and, if applicable, lines 186 and 188 (see instructions) .....
- 31** New York State gains or losses on disposition of property from line 190 .....
- 32** Amount of special additional mortgage recording tax deducted on your federal return and claimed as a tax credit .....
- 33** Any other federal deduction previously allowable as a deduction under Article 9-B or 9-C (attach explanation) .....
- 34** Bad debt deduction allowed under IRC sections 166 or 585 .....
- 35** Twenty percent excess of bad debt deduction (see instructions; attach computation) .....
- 36** Other additions to FTI (attach list) .....
- 37** Total additions (add lines 25 through 36) .....

**Subtractions**

- 38** Interest and other expenses not deducted on federal return which are applicable to lines 25, 26, and 27 .....
- 39** Enter total amount of allowable New York depreciation from Form CT-399 and, if applicable, line 189 (see instructions) .....
- 40** Federal gains or losses on disposition of property from lines 191 and 193 .....
- 41** Federal income or gain from installment method transactions under Article 9-B or 9-C .....
- 42** IRC section 78 dividends included in the computation of lines 24 through 27 .....
- 43** Amount of wages not deducted on the federal return due to IRC section 280C .....
- 44** Amount of money received from the FDIC, FSLIC, or RTC (see instructions) .....
- 45** Interest income from subsidiary capital × 17% (.17) (see instructions) (attach list) .....
- 46** Dividend income from subsidiary capital × 60% (.6) (see instructions) .....
- 47** Net gains from subsidiary capital × 60% (.6) (see instructions) .....
- 48** Interest income on obligations of New York State, its political subdivisions, and the United States × 22½% (.225) (see instructions) (attach list) .....
- 49** Adjusted eligible net income of an international banking facility (IBF) from line 185 .....
- 50** Recaptured reserve for losses on loans from IRC section 585(c) taxpayers included on line 24 .....
- 51** Recoveries of charged-off loans included on line 24 for IRC section 585 taxpayers .....
- 52** Bad debt deduction under section 1453(h) (attach computation) .....
- 53** Bad debt deduction under section 1453(i) (attach computation) .....
- 54** New York NOL deduction (see instructions) .....
- 55** Other subtractions from FTI (attach list) .....
- 56** Total subtractions (add lines 38 through 55) .....
- 57a** ENI (add line 24 and line 37; subtract line 56) .....
- 57b** Allocated ENI (multiply line 57a by % from line 114) .....
- 58** Optional depreciation adjustments (add line 187 and line 192) .....
- 59** Allocated taxable ENI (line 57b plus or minus line 58, column E; enter next to line 1) .....

|      | A<br>Parent<br>corporation | B<br>Total from<br>member corporations | C<br>Subtotal<br><i>(column A + column B)</i> | D<br>Intercorporate<br>eliminations | E<br>Combined totals<br><i>(column C - column D)</i> |
|------|----------------------------|--|---|-------------------------------------|--|
| 18.  |                            |  |   |                                     |  |
| 19.  |                            |  |   |                                     |  |
| 20.  |                            |  |   |                                     |  |
| 21.  |                            |  |   |                                     |  |
| 22a. |                            |  |   |                                     |  |
| 22b. |                            |  |   |                                     |  |
| 22c. |                            |  |   |                                     |  |
| 23.  |                            |  |   |                                     |  |

**Schedule B — Computation and allocation of ENI**

|     |  |  |  |  |  |     |   |
|-----|--|--|--|--|--|-----|---|
| 24. |  |  |  |  |  | 24. | • |
|-----|--|--|--|--|--|-----|---|

**Additions**

|     |  |  |  |  |  |     |   |
|-----|--|--|--|--|--|-----|---|
| 25. |  |  |  |  |  | 25. | • |
| 26. |  |  |  |  |  | 26. | • |
| 27. |  |  |  |  |  | 27. | • |
| 28. |  |  |  |  |  | 28. | • |
| 29. |  |  |  |  |  | 29. | • |
| 30. |  |  |  |  |  | 30. | • |
| 31. |  |  |  |  |  | 31. | • |
| 32. |  |  |  |  |  | 32. | • |
| 33. |  |  |  |  |  | 33. | • |
| 34. |  |  |  |  |  | 34. | • |
| 35. |  |  |  |  |  | 35. | • |
| 36. |  |  |  |  |  | 36. | • |
| 37. |  |  |  |  |  | 37. | • |

**Subtractions**

|      |  |  |  |  |  |      |   |
|------|--|--|--|--|--|------|---|
| 38.  |  |  |  |  |  | 38.  | • |
| 39.  |  |  |  |  |  | 39.  | • |
| 40.  |  |  |  |  |  | 40.  | • |
| 41.  |  |  |  |  |  | 41.  | • |
| 42.  |  |  |  |  |  | 42.  | • |
| 43.  |  |  |  |  |  | 43.  | • |
| 44.  |  |  |  |  |  | 44.  | • |
| 45.  |  |  |  |  |  | 45.  | • |
| 46.  |  |  |  |  |  | 46.  | • |
| 47.  |  |  |  |  |  | 47.  | • |
| 48.  |  |  |  |  |  | 48.  | • |
| 49.  |  |  |  |  |  | 49.  | • |
| 50.  |  |  |  |  |  | 50.  | • |
| 51.  |  |  |  |  |  | 51.  | • |
| 52.  |  |  |  |  |  | 52.  | • |
| 53.  |  |  |  |  |  | 53.  | • |
| 54.  |  |  |  |  |  | 54.  | • |
| 55.  |  |  |  |  |  | 55.  | • |
| 56.  |  |  |  |  |  | 56.  | • |
| 57a. |  |  |  |  |  | 57a. | • |
| 57b. |  |  |  |  |  | 57b. | • |
| 58.  |  |  |  |  |  | 58.  | • |
| 59.  |  |  |  |  |  | 59.  | • |

|                     |                                |
|---------------------|--------------------------------|
| Name of corporation | Employer identification number |
|---------------------|--------------------------------|

**Schedule C — Computation and allocation of alternative ENI**

- 60 ENI from line 57a (see instructions).....
- 61 Interest income from subsidiary capital from line 45.....
- 62 Dividend income from subsidiary capital from line 46.....
- 63 Net gain from subsidiary capital from line 47.....
- 64 Interest income on obligations of New York State, its political subdivisions, and the United States, from line 48.....
- 65 Alternative ENI (add lines 60 through 64).....
- 66 Allocated alternative ENI (multiply line 65 by % from line 121, column E).....
- 67 Optional depreciation adjustments from line 58.....
- 68 Allocated taxable alternative ENI (line 66 plus or minus line 67, column E; also enter next to line 2).....

**Schedule D — Computation of taxable assets (see instructions)**

- 69 Average value of total assets.....
- 70 Money or other property received from the FDIC, FSLIC, or RTC (see instructions).....
- 71 Taxable assets (subtract line 70 from line 69).....
- 72 Allocated taxable assets (multiply line 71 by % from line 161; also enter next to line 3).....
- 73 Compute net worth ratio:
 

|  |  |   |  |
|--|--|---|--|
|  | Net worth on last day of the tax year    | = |  |
|  | Total assets on last day of the tax year | = |  |
- 74 Compute percentage of mortgages included in total assets:
 

|  |   |   |  |
|--|---|---|--|
|  | Average quarterly balance of mortgages    | = |  |
|  | Average quarterly balance of total assets | = |  |

**Additional information required**

Are you a member of a federal consolidated group?..... Yes •  No •   
 If you answered Yes, complete items A through E.

- A. Number of corporations included in the federal consolidated group..... ●
- B. Total consolidated FTI before the net operating loss deduction (NOLD)..... ●
- C. Total consolidated FTI before the NOLD of corporations that are included in the federal consolidated return but that are not included in a combined return for New York State tax..... ●
- D. Total consolidated FTI before the NOLD of corporations that are not included in the federal consolidated return but that are included in a combined return for New York State tax..... ●

E. If 65% or more of the voting stock of the deemed parent corporation is owned or controlled, directly or indirectly, by another corporation, enter the name and employer identification number of that corporation below.

|      |                                |
|------|--------------------------------|
| Name | Employer identification number |
|------|--------------------------------|

F. Mark an **X** in the box and attach Form CT-60-QSSS if any member of the combined group is the parent of a QSSS .....

|  | A<br>Parent<br>corporation | B<br>Total from<br>member corporations | C<br>Subtotal<br><i>(column A + column B)</i> | D<br>Intercorporate<br>eliminations | E<br>Combined totals<br><i>(column C - column D)</i> |
|--|----------------------------|--|---|-------------------------------------|--|
|--|----------------------------|--|---|-------------------------------------|--|

**Schedule C — Computation and allocation of alternative ENI**

|     |  |  |  |  |  |     |   |
|-----|--|--|--|--|--|-----|---|
| 60. |  |  |  |  |  | 60. |   |
| 61. |  |  |  |  |  | 61. | • |
| 62. |  |  |  |  |  | 62. | • |
| 63. |  |  |  |  |  | 63. | • |
| 64. |  |  |  |  |  | 64. | • |
| 65. |  |  |  |  |  | 65. |   |
| 66. |  |  |  |  |  | 66. |   |
| 67. |  |  |  |  |  | 67. |   |
| 68. |  |  |  |  |  | 68. |   |

**Schedule D — Computation of taxable assets**

|     |  |   |  |  |  |     |   |
|-----|--|---|--|--|--|-----|---|
| 69. |  |   |  |  |  | 69. | • |
| 70. |  |   |  |  |  | 70. | • |
| 71. |  |   |  |  |  | 71. |   |
| 72. |  |   |  |  |  | 72. | • |
| 73. |  | % |  |  |  |     |   |
| 74. |  | % |  |  |  |     |   |

Note: A banking corporation whose largest tax, computed on a separate basis, is on taxable assets and whose net worth ratio, computed on a separate basis, is less than 5% and whose total assets, computed on a separate basis, are made up of 33% or more of mortgages, cannot be included on the combined return.

|                     |                                |
|---------------------|--------------------------------|
| Name of corporation | Employer identification number |
|---------------------|--------------------------------|

**Schedule E — Allocation percentages** (see instructions)

Are you a banking corporation described in Tax Law section 1452(a)(9)? ..... Yes •  No •

Are you substantially engaged in providing management, administrative, or distribution services to an investment company as such terms are defined in Tax Law section 1454(a)(2)(G)? ..... Yes •  No •

If you answered Yes to **both** questions, then you must allocate using weighted factors (see page 12 of the instructions).

**Part 1 — Computation of ENI allocation percentage**

If you are claiming an allocation outside New York State, attach an explanation of the business carried on outside New York that gives you the right to allocate. If the corporation has an IBF located in New York State, mark an **X** in the appropriate box below and see instructions.

The corporation computed ENI using the: IBF modification method •  or IBF formula allocation method •

- 75 Wages, salaries, and other compensation of employees (except general executive officers) within New York State .....
- 76 Multiply line 75 by 80% (.8).....
- 77 Wages, salaries, and other compensation of employees (except general executive officers) within and outside New York State .....
- 78 Percentage in New York State (divide line 76 by line 77 in column E) .....

**Receipts during the tax period from within New York State:**

- 79 Interest income from loans and financing leases.....
- 80 Other income from loans and financing leases.....
- 81 Lease transactions and rents.....
- 82 Interest from bank, credit, travel, entertainment, and other credit card receivables .....
- 83 Service charges and fees from bank, credit, travel, entertainment, and other credit cards .....
- 84 Receipts from merchant discounts.....
- 85 Income from trading activities and investment activities .....
- 86 Fees or charges from letters of credit, traveler's checks, and money orders .....
- 87 Performance of services .....
- 88 Royalties .....
- 89 All other business receipts.....
- 90 Total receipts from within New York State (add lines 79 through 89) .....

**Receipts during the tax period from within and outside New York State:**

- 91 Interest income from loans and financing leases.....
- 92 Other income from loans and financing leases.....
- 93 Lease transactions and rents.....
- 94 Interest from bank, credit, travel, entertainment, and other credit card receivables .....
- 95 Service charges and fees from bank, credit, travel, entertainment, and other credit cards .....
- 96 Receipts from merchant discounts.....
- 97 Income from trading activities and investment activities .....
- 98 Fees or charges from letters of credit, traveler's checks, and money orders .....
- 99 Performance of services .....
- 100 Royalties .....
- 101 All other business receipts.....
- 102 Total receipts from within and outside New York State (add lines 91 through 101) .....
- 103 Percentage in New York State (divide line 90, by line 102, in each of columns A and E) .....
- 104 Additional receipts percentage (enter percentage from line 103, column E; see instructions for exception) .....

**Deposits maintained in branches within New York State:**

- 105 Deposits of \$100,000 or more.....
- 106 Deposits of less than \$100,000.....
- 107 Deposits within New York State (add lines 105 and 106).....

(continued)

|  | A<br>Parent<br>corporation | B<br>Total from<br>member corporations | C<br>Subtotal<br><i>(column A + column B)</i> | D<br>Intercorporate<br>eliminations | E<br>Combined totals<br><i>(column C - column D)</i> |
|--|----------------------------|--|---|-------------------------------------|--|
|--|----------------------------|--|---|-------------------------------------|--|

**Schedule E — Allocation percentages**

**Part 1**

|     |  |  |  |  |     |   |
|-----|--|--|--|--|-----|---|
| 75. |  |  |  |  | 75. |   |
| 76. |  |  |  |  | 76. | • |
| 77. |  |  |  |  | 77. | • |
| 78. |  |  |  |  | 78. | • |
|     |  |  |  |  |     | % |

|     |  |  |  |  |     |   |
|-----|--|--|--|--|-----|---|
| 79. |  |  |  |  | 79. | • |
| 80. |  |  |  |  | 80. | • |
| 81. |  |  |  |  | 81. | • |
| 82. |  |  |  |  | 82. | • |
| 83. |  |  |  |  | 83. | • |
| 84. |  |  |  |  | 84. | • |
| 85. |  |  |  |  | 85. | • |
| 86. |  |  |  |  | 86. | • |
| 87. |  |  |  |  | 87. | • |
| 88. |  |  |  |  | 88. | • |
| 89. |  |  |  |  | 89. | • |
| 90. |  |  |  |  | 90. | • |

|      |  |  |  |  |      |   |
|------|--|--|--|--|------|---|
| 91.  |  |  |  |  | 91.  | • |
| 92.  |  |  |  |  | 92.  | • |
| 93.  |  |  |  |  | 93.  | • |
| 94.  |  |  |  |  | 94.  | • |
| 95.  |  |  |  |  | 95.  | • |
| 96.  |  |  |  |  | 96.  | • |
| 97.  |  |  |  |  | 97.  | • |
| 98.  |  |  |  |  | 98.  | • |
| 99.  |  |  |  |  | 99.  | • |
| 100. |  |  |  |  | 100. | • |
| 101. |  |  |  |  | 101. | • |
| 102. |  |  |  |  | 102. | • |
| 103. |  |  |  |  | 103. | • |
| 104. |  |  |  |  | 104. | • |
|      |  |  |  |  |      | % |

|      |  |  |  |  |      |   |
|------|--|--|--|--|------|---|
| 105. |  |  |  |  | 105. | • |
| 106. |  |  |  |  | 106. | • |
| 107. |  |  |  |  | 107. | • |

|                     |                                |
|---------------------|--------------------------------|
| Name of corporation | Employer identification number |
|---------------------|--------------------------------|

**Schedule E — Allocation percentages** *(continued)*

**Deposits maintained in branches within and outside New York State:**

- 108 Deposits of \$100,000 or more.....
- 109 Deposits of less than \$100,000.....
- 110 Deposits within and outside New York State *(add lines 108 and 109)* .....
- 111 Percentage in New York State *(divide line 107 by line 110, in each of columns A and E)* .....
- 112 Additional deposits percentage *(enter percentage from line 111, column E; see instructions for exception)* .....
- 113 Total of New York State percentages *(add lines 78, 103, 104, 111, and 112 in column E; see instructions for exception)* .....
- 114 ENI allocation percentage *(see instructions)*.....

**Part 2 — Computation of alternative ENI allocation percentage**

- 115 Wages, salaries, and other compensation of employees (except general executive officers) within New York State .....
- 116 Wages, salaries, and other compensation of employees (except general executive officers) within and outside New York State .....
- 117 Percentage in New York State *(divide line 115 by line 116, in each of columns A and E)* .....
- 118 Receipts percentage *(enter percentage from line 103)* .....
- 119 Deposits percentage *(enter percentage from line 111)* .....
- 120 Add lines 117, 118, and 119 in columns A and E *(see instructions for exception)*.....
- 121 Alternative ENI allocation percentage *(see instructions)* .....

**Part 3 — Computation of taxable assets allocation percentage** *(If the corporation has an IBF located in New York State, activities of the IBF must be included in both the numerator and denominator when computing the taxable assets allocation.)*

- 122 Wages, salaries, and other compensation of employees (except general executive officers) within New York State .....
- 123 Multiply line 122 by 80% (.8).....
- 124 Wages, salaries, and other compensation of employees (except general executive officers) within and outside New York State .....
- 125 Percentage in New York State *(divide line 123 by line 124 in column E)* .....

**Receipts during the tax period from within New York State:**

- 126 Interest income from loans and financing leases.....
- 127 Other income from loans and financing leases.....
- 128 Lease transactions and rents.....
- 129 Interest from bank, credit, travel, entertainment, and other credit card receivables .....
- 130 Service charges and fees from bank, credit, travel, entertainment, and other credit cards .....
- 131 Receipts from merchant discounts.....
- 132 Income from trading activities and investment activities .....
- 133 Fees or charges from letters of credit, traveler's checks, and money orders .....
- 134 Performance of services .....
- 135 Royalties .....
- 136 All other business receipts.....
- 137 Total receipts from within New York State *(add lines 126 through 136)*.....

**Receipts during the tax period from within and outside New York State:**

- 138 Interest income from loans and financing leases.....
- 139 Other income from loans and financing leases.....
- 140 Lease transactions and rents.....
- 141 Interest from bank, credit, travel, entertainment, and other credit card receivables .....
- 142 Service charges and fees from bank, credit, travel, entertainment, and other credit cards .....
- 143 Receipts from merchant discounts.....
- 144 Income from trading activities and investment activities .....
- 145 Fees or charges from letters of credit, traveler's checks, and money orders .....
- 146 Performance of services .....
- 147 Royalties .....
- 148 All other business receipts.....
- 149 Total receipts from within and outside New York State *(add lines 138 through 148)* .....
- 150 Percentage in New York State *(divide line 137 by line 149 in column E)* .....
- 151 Additional receipts percentage *(enter percentage from line 150, column E; see instructions for exception)* .....

*(continued)*



|  | A<br>Parent<br>corporation | B<br>Total from<br>member corporations | C<br>Subtotal<br><i>(column A + column B)</i> | D<br>Intercorporate<br>eliminations | E<br>Combined totals<br><i>(column C - column D)</i> |
|--|----------------------------|--|---|-------------------------------------|--|
|--|----------------------------|--|---|-------------------------------------|--|

Schedule E — Allocation percentages (continued)

|      |  |   |  |  |      |   |  |   |
|------|--|---|--|--|------|---|--|---|
| 108. |  |   |  |  | 108. | • |  |   |
| 109. |  |   |  |  | 109. | • |  |   |
| 110. |  |   |  |  | 110. | • |  |   |
| 111. |  | % |  |  | 111. | • |  | % |
| 112. |  |   |  |  | 112. | • |  | % |
| 113. |  |   |  |  | 113. | • |  | % |
| 114. |  |   |  |  | 114. | • |  | % |

Part 2

|      |  |   |  |  |      |   |  |   |
|------|--|---|--|--|------|---|--|---|
| 115. |  |   |  |  | 115. | • |  |   |
| 116. |  |   |  |  | 116. | • |  |   |
| 117. |  | % |  |  | 117. | • |  | % |
| 118. |  | % |  |  | 118. | • |  | % |
| 119. |  | % |  |  | 119. | • |  | % |
| 120. |  | % |  |  | 120. | • |  | % |
| 121. |  | % |  |  | 121. | • |  | % |

Part 3

|      |  |  |  |  |      |   |  |   |
|------|--|--|--|--|------|---|--|---|
| 122. |  |  |  |  | 122. | • |  |   |
| 123. |  |  |  |  | 123. | • |  |   |
| 124. |  |  |  |  | 124. | • |  |   |
| 125. |  |  |  |  | 125. | • |  | % |

|      |  |  |  |  |      |   |  |  |
|------|--|--|--|--|------|---|--|--|
| 126. |  |  |  |  | 126. | • |  |  |
| 127. |  |  |  |  | 127. | • |  |  |
| 128. |  |  |  |  | 128. | • |  |  |
| 129. |  |  |  |  | 129. | • |  |  |
| 130. |  |  |  |  | 130. | • |  |  |
| 131. |  |  |  |  | 131. | • |  |  |
| 132. |  |  |  |  | 132. | • |  |  |
| 133. |  |  |  |  | 133. | • |  |  |
| 134. |  |  |  |  | 134. | • |  |  |
| 135. |  |  |  |  | 135. | • |  |  |
| 136. |  |  |  |  | 136. | • |  |  |
| 137. |  |  |  |  | 137. | • |  |  |

|      |  |  |  |  |      |   |  |   |
|------|--|--|--|--|------|---|--|---|
| 138. |  |  |  |  | 138. | • |  |   |
| 139. |  |  |  |  | 139. | • |  |   |
| 140. |  |  |  |  | 140. | • |  |   |
| 141. |  |  |  |  | 141. | • |  |   |
| 142. |  |  |  |  | 142. | • |  |   |
| 143. |  |  |  |  | 143. | • |  |   |
| 144. |  |  |  |  | 144. | • |  |   |
| 145. |  |  |  |  | 145. | • |  |   |
| 146. |  |  |  |  | 146. | • |  |   |
| 147. |  |  |  |  | 147. | • |  |   |
| 148. |  |  |  |  | 148. | • |  |   |
| 149. |  |  |  |  | 149. | • |  |   |
| 150. |  |  |  |  | 150. | • |  | % |
| 151. |  |  |  |  | 151. | • |  | % |

|                     |                                |
|---------------------|--------------------------------|
| Name of corporation | Employer identification number |
|---------------------|--------------------------------|

**Schedule E — Allocation percentages** *(continued)*

**Deposits maintained in branches within New York State:**

- 152 Deposits of \$100,000 or more.....
- 153 Deposits of less than \$100,000.....
- 154 Deposits within New York State *(add lines 152 and 153)* .....

**Deposits maintained in branches within and outside New York State:**

- 155 Deposits of \$100,000 or more.....
- 156 Deposits of less than \$100,000.....
- 157 Deposits within and outside New York State *(add lines 155 and 156)* .....
- 158 Percentage in New York State *(divide line 154 by line 157 in column E)* .....
- 159 Additional deposits percentage *(enter percentage from line 158; see instructions for exception)* .....
- 160 Total New York State percentages *(add lines 125, 150, 151, 158, and 159 in column E; see instructions for exception)* .....
- 161 Taxable assets allocation percentage *(see instructions)* .....

**Schedule F — Computation of IBF adjusted eligible net income or loss**

If the corporation has an IBF located in New York State, mark an **X** in the appropriate box below and see instructions.

The corporation computed ENI using the: IBF modification method  or IBF formula allocation method

**Computation of eligible gross income**

- 162 Interest income from eligible loans ..... ● 162.
- 163 Interest income from eligible deposits..... ● 163.
- 164 Income from foreign exchange trading and hedging transactions ..... ● 164.
- 165 Fee income from eligible transactions..... ● 165.
- 166 Eligible gross income *(add lines 162 through 165)*..... ● 166.

**Computation of applicable expenses**

- 167 Direct expenses ..... ● 167.
- 168 Indirect expenses..... ● 168.
- 169 Total applicable expenses *(add lines 167 and 168)* ..... 169.

**Computation of ineligible funding amount**

- 170 Eligible net income *(subtract line 169 from line 166)* ..... 170.
- 171 Average aggregate liabilities and other sources of funds of the IBF which are not owed to or received from foreign persons..... ● 171.
- 172 Average aggregate liabilities and other sources of funds of the IBF..... ● 172.
- 173 Divide line 171 by line 172..... 173. %
- 174 Ineligible funding amount *(multiply line 170 by line 173)* ..... 174.
- 175 Remaining amount *(subtract line 174 from line 170; also enter on line 183)* ..... 175.

**Computation of floor amount and adjusted eligible net income or loss**

- 176 Average aggregate amount of loans to and deposits with foreign persons in financial accounts within New York State for tax years 1975, 1976, and 1977 ..... ● 176.
- 177 Statutory percentage for the current tax year ..... ● 177. %
- 178 Multiply line 176 by line 177..... 178.
- 179 Average aggregate amount of loans to and deposits with foreign persons in financial accounts within New York State (other than IBF) for the current tax year..... ● 179.
- 180 Balance *(subtract line 179 from line 178)*..... 180.
- 181 Average aggregate amount of loans to and deposits with foreign persons in financial accounts of the IBF for the current tax year ..... ● 181.
- 182 Enter **100** or the percentage obtained by dividing line 180 by line 181, whichever is less..... 182. %
- 183 Remaining amount *(enter amount from line 175)* ..... ● 183.
- 184 Floor amount *(multiply line 182 by line 183)* ..... 184.
- 185 Adjusted eligible net income or loss *(subtract line 184 from line 183; also enter on line 49)* ..... 185.

| A<br>Parent<br>corporation | B<br>Total from<br>member corporations | C<br>Subtotal<br><i>(column A + column B)</i> | D<br>Intercorporate<br>eliminations | E<br>Combined totals<br><i>(column C - column D)</i> |
|----------------------------|--|---|-------------------------------------|--|
|----------------------------|--|---|-------------------------------------|--|

**Schedule E — Allocation percentages** *(continued)*

|      |  |  |  |  |      |      |   |   |
|------|--|--|--|--|------|------|---|---|
| 152. |  |  |  |  | 152. | •    |   |   |
| 153. |  |  |  |  | 153. | •    |   |   |
| 154. |  |  |  |  | 154. | •    |   |   |
| 155. |  |  |  |  | 155. | •    |   |   |
| 156. |  |  |  |  | 156. | •    |   |   |
| 157. |  |  |  |  | 157. | •    |   |   |
| 158. |  |  |  |  |      | 158. | • | % |
| 159. |  |  |  |  |      | 159. | • | % |
| 160. |  |  |  |  |      | 160. | • | % |
| 161. |  |  |  |  |      | 161. | • | % |

**Schedule G — Computation of New York depreciation on certain property when method differs from federal** *(see instructions)*

**Part 1** — Depreciation on qualified New York property acquired between January 1, 1964, and December 31, 1967 *(Enter the description of each property and date acquired ; then complete columns C through H on the corresponding lines below)*

| Item   | A<br>Description of property |  |  |   |   | B<br>Date acquired            |
|--------|------------------------------|--|--|---|---|-------------------------------|
| A      |                              |  |  |   |   |                               |
| B      |                              |  |  |   |   |                               |
| C      |                              |  |  |   |   |                               |
| D      |                              |  |  |   |   |                               |
| E      |                              |  |  |   |   |                               |
| Item   | C<br>Cost                    | D<br>Federal depreciation<br>prior years | E<br>Federal depreciation<br>this year | F<br>New York depreciation<br>prior years | G<br>New York depreciation<br>this year | H<br>Undepreciated<br>balance |
| A      |                              |  |  |   |   |                               |
| B      |                              |  |  |   |   |                               |
| C      |                              |  |  |   |   |                               |
| D      |                              |  |  |   |   |                               |
| E      |                              |  |  |   |   |                               |
| Totals |                              |  | •                                      |   | •                                       |                               |

**186** Add Part 1 column E amounts  ↑  
Combine this total with line 188, and enter on line 30.

**187** Add Part 1 column G amounts  ↑  
Combine this total with line 192, and enter on line 58.

**Schedule G — Computation of New York depreciation on certain property when method differs from federal** (continued)

**Part 2** — Other property on which New York depreciation differs from federal (enter the description of each property and the date acquired; then complete columns C through H on the corresponding lines below).

| Item   | A Description of property |                                    |  |                                  |                                     |  | B Date acquired                   |                         |
|--------|---------------------------|------------------------------------|--|----------------------------------|-------------------------------------|--|-----------------------------------|-------------------------|
| A      |                           |                                    |  |                                  |                                     |  |                                   |                         |
| B      |                           |                                    |  |                                  |                                     |  |                                   |                         |
| C      |                           |                                    |  |                                  |                                     |  |                                   |                         |
| D      |                           |                                    |  |                                  |                                     |  |                                   |                         |
| E      |                           |                                    |  |                                  |                                     |  |                                   |                         |
| Item   | C Cost                    | D Federal depreciation prior years |  | E Federal depreciation this year | F New York depreciation prior years |  | G New York depreciation this year | H Undepreciated balance |
| A      |                           |                                    |  |                                  |                                     |  |                                   |                         |
| B      |                           |                                    |  |                                  |                                     |  |                                   |                         |
| C      |                           |                                    |  |                                  |                                     |  |                                   |                         |
| D      |                           |                                    |  |                                  |                                     |  |                                   |                         |
| E      |                           |                                    |  |                                  |                                     |  |                                   |                         |
| Totals |                           |                                    |  |                                  |                                     |  |                                   |                         |

**188** Add Part 2, column E amounts \_\_\_\_\_  
 Combine this total with line 186 and enter on line 30.

**189** Add Part 2, column G amounts; enter on line 39.

**Schedule H — Computation of New York gain or loss on disposition of certain property acquired prior to January 1, 1973** (see instructions)

**Part 1** — Property acquired prior to: January 1, 1926 by commercial banks; January 1, 1944 by savings banks; January 1, 1953 by savings and loan associations

| A Description of property                                       | B Cost or fair market price on valuation date |  | C Selling price |  | D New York gain or loss (column C - column B) |  | E Federal gain or loss |  |
|---|---|--|-----------------|--|---|--|------------------------|--|
|   |   |  |                 |  |   |  |                        |  |
|   |   |  |                 |  |   |  |                        |  |
|   |   |  |                 |  |   |  |                        |  |
|   |   |  |                 |  |   |  |                        |  |
| <b>Totals</b> (show any negative amounts with a minus (-) sign) |   |  |                 |  |   |  |                        |  |

**190** Add column D amounts; enter on line 31.

**191** Add column E amounts; combine this total with line 193 and enter on line 40.

**Part 2** — Property on which optional depreciation was claimed or on which the method used for New York State differed from federal depreciation deducted

| A Description of property                                       | B Depreciation basis for New York State |  | C Selling price |  | D New York gain or loss (column C - column B) |  | E Federal gain or loss |  |
|---|---|--|-----------------|--|---|--|------------------------|--|
|   |   |  |                 |  |   |  |                        |  |
|   |   |  |                 |  |   |  |                        |  |
|   |   |  |                 |  |   |  |                        |  |
|   |   |  |                 |  |   |  |                        |  |
| <b>Totals</b> (show any negative amounts with a minus (-) sign) |   |  |                 |  |   |  |                        |  |

**192** Add column D amounts; combine this total with line 187 and enter on line 58.

**193** Add column E amounts; combine this total with line 191 and enter on line 40.

**Schedule I — Computation of the issuer's allocation percentage** — Complete Method 1, 2, or 3 (see instructions)

**Method 1** — Enter the alternative ENI allocation percentage from

line 121, column A (enter here and on line 23) \_\_\_\_\_ %

**Method 2** — **A** New York State gross income \_\_\_\_\_

**B** Worldwide gross income \_\_\_\_\_

Divide line A by line B (enter here and on line 23) \_\_\_\_\_ %

**Method 3 — Computation of subsidiary capital allocated to New York State** — Attach separate sheets displaying this information formatted as below, if necessary.

**Description of subsidiary capital**

**A — Description of subsidiary capital** (list the name of each corporation and the EIN here; for each corporation, complete columns B through G on the corresponding lines below)

| Item                       | Name                                  |   |  |   |  |  | EIN                              |  |
|----------------------------|---------------------------------------|---|--|---|--|--|----------------------------------|--|
| A                          |                                       |   |  |   |  |  |                                  |  |
| B                          |                                       |   |  |   |  |  |                                  |  |
| C                          |                                       |   |  |   |  |  |                                  |  |
| D                          |                                       |   |  |   |  |  |                                  |  |
| E                          |                                       |   |  |   |  |  |                                  |  |
| A<br>Item                  | B<br>% of<br>voting<br>stock<br>owned | C<br>Average<br>value<br>of subsidiary<br>capital |  | D<br>Current liabilities<br>attributable to<br>subsidiary capital |  | E<br>Net average<br>value<br>(column C – column D) | F<br>Issuer's<br>allocation<br>% | G<br>Value allocated<br>to New York State<br>(column E x column F) |
| A                          |                                       |   |  |   |  |  |                                  |  |
| B                          |                                       |   |  |   |  |  |                                  |  |
| C                          |                                       |   |  |   |  |  |                                  |  |
| D                          |                                       |   |  |   |  |  |                                  |  |
| E                          |                                       |   |  |   |  |  |                                  |  |
| Amounts from attached list |                                       |   |  |   |  |  |                                  |  |
| <b>194</b> Totals.....     |                                       |   |  |   |  | <b>194.</b>  |                                  |  |

**Method 3 — Computation of business capital allocated to New York State**

|  |             |   |
|--|-------------|---|
| <b>195</b> Average value of total assets from line 69, column A .....                        | <b>195.</b> |   |
| <b>196</b> Current liabilities (see instructions) .....                                      | <b>196.</b> |   |
| <b>197</b> Total net average value of subsidiary capital from line 194, column E .....       | <b>197.</b> |   |
| <b>198</b> Net business assets (subtract lines 196 and 197 from line 195) .....              | <b>198.</b> |   |
| <b>199</b> Enter the alternative ENI allocation percentage from line 121, column A.....      | <b>199.</b> | % |
| <b>200</b> Business assets allocated to New York State (multiply line 198 by line 199) ..... | <b>200.</b> |   |

**Method 3 — Computation of issuer's allocation percentage**

|  |             |   |
|--|-------------|---|
| <b>201</b> Subsidiary capital and business capital allocated to New York State (add line 194, column G and line 200) ..... | <b>201.</b> |   |
| <b>202</b> Total worldwide capital (see instructions) .....  | <b>202.</b> |   |
| <b>203</b> Issuer's allocation percentage (divide line 201 by line 202). Enter here and on line 23.....                    | <b>203.</b> | % |

**Composition of prepayments** — Use the following worksheet to determine the prepayments of franchise tax on line 12. If you need more space, write **see attached** here and enter all relevant prepayment information on a separate sheet. Transfer the total to line 12.

|   |              | Combined franchise tax |        |
|---|--------------|------------------------|--------|
|   |              | Date paid              | Amount |
| <b>204</b> Mandatory first installment of combined group .....  | <b>204.</b>  |                        |        |
| <b>205a</b> Second combined group installment from Form CT-400.....   | <b>205a.</b> |                        |        |
| <b>205b</b> Third combined group installment from Form CT-400.....  | <b>205b.</b> |                        |        |
| <b>205c</b> Fourth combined group installment from Form CT-400.....   | <b>205c.</b> |                        |        |
| <b>206</b> Payment with extension request, from Form CT-5.3 .....   | <b>206.</b>  |                        |        |
| <b>207</b> Overpayment credited from prior years' combined returns (see instructions) .....                                       | <b>207.</b>  |                        |        |
| <b>208</b> Overpayment credited from Form CT-32-M <input type="text" value="Period"/> .....                                       | <b>208.</b>  |                        |        |
| <b>209</b> Total prepayments from member corporations not previously included in the combined return (from Forms CT-32-A/C) ..... | <b>209.</b>  |                        |        |
| <b>210</b> Total prepayments (add lines 204 through 209; enter on line 12) .....  | <b>210.</b>  |                        |        |

**Summary of tax credits claimed on line 6 against current year's franchise tax**

|  |                      |   |                      |
|--|----------------------|---|----------------------|
| Form CT-41<br>Credit for employment of persons with disabilities ..... | <input type="text"/> | Form CT-606<br>QEZE credit for real property taxes ..                     | <input type="text"/> |
| Form CT-43<br>Special additional mortgage recording tax credit.....    | <input type="text"/> | Form CT-611<br>Brownfield redevelopment tax credit                        | <input type="text"/> |
| Form CT-44<br>ITC for financial services industry .....                | <input type="text"/> | Form CT-612<br>Remediated brownfield credit for real property taxes ..... | <input type="text"/> |
| Form CT-249<br>Long-term care insurance credit .                       | <input type="text"/> | Form CT-613<br>Environmental remediation insurance credit.....            | <input type="text"/> |
| Form CT-250<br>Defibrillator credit .....                              | <input type="text"/> | Form DTF-624<br>Low-income housing credit .....                           | <input type="text"/> |
| Form CT-259<br>Fuel cell electric generating credit                    | <input type="text"/> | Form DTF-630<br>Green building credit .....                               | <input type="text"/> |
| Form CT-601<br>EZ wage credit .....                                    | <input type="text"/> | CT-631<br>Security officer training tax credit.....                       | <input type="text"/> |
| Form CT-601.1<br>ZEA wage credit.....                                  | <input type="text"/> | Credit for servicing mortgages (attach statement) .....                   | <input type="text"/> |
| Form CT-602<br>EZ capital tax credit.....                              | <input type="text"/> | Other credits.....  | <input type="text"/> |
| Form CT-604<br>QEZE tax reduction credit .....                         | <input type="text"/> |   |                      |

|   |                      |             |                      |
|---|----------------------|-------------|----------------------|
| <b>211</b> Total of credits listed above (enter here and on line 6 indicating a negative total as such; attach appropriate form or statement for each credit claimed) ..... | <input type="text"/> | <b>211.</b> | <input type="text"/> |
| <b>212</b> Total tax credits claimed on line 211 that are refund eligible (see instructions) .....  | <input type="text"/> | <b>212.</b> | <input type="text"/> |

|                               |  |                                   |   |
|-------------------------------|--|-----------------------------------|---|
| <b>Third – party designee</b> | Do you want to allow another person to discuss this return with the Tax Dept? (see instructions) <b>Yes</b> <input type="checkbox"/> (complete the following) <b>No</b> <input type="checkbox"/> |                                   |   |
|                               | Designee's name  | Designee's phone number<br>(    ) | Personal identification number (PIN) <input type="text"/> |

**Certification:** I certify that this return and any attachments are to the best of my knowledge and belief true, correct, and complete.

|                                |   |                |   |          |           |
|--------------------------------|---|----------------|---|----------|-----------|
| Signature of authorized person |   | Official title |   | Date     |           |
| Paid preparer use only         | Signature of individual preparing this return |                | Firm's name (or yours if self-employed) |          |           |
|                                | Address                                       | City           | State                                   | ZIP code | ID number |
|                                |   |                |   | Date     |           |